

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C C00499020		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Action Solutions			Date M M / D D / Y Y Y Y Y Y Y Y 03 / 08 / 2012		
Mailing Address 6855 NE Arnold Ave.			Amount 650.00		
City Adair Village		State OR	Zip Code 97300		
Purpose of Expenditure IE-Hatch-Data Management		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: ORRIN G HATCH				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 550889.53			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Freedomworks			Date M M / D D / Y Y Y Y Y Y Y Y 03 / 08 / 2012		
Mailing Address 400 N CAPITOL STREET NW SUITE 765			Amount 97.11		
City Washington		State DC	Zip Code 20001		
Purpose of Expenditure IE-Hatch-Est. Staff & Overhead		Category/ Type 001		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: ORRIN G HATCH				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 550889.53			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			747.11		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Ryan Hecker</p> <p>Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y Y Y 03 / 10 / 2012</p>					